

**City of Norfolk
Division of Parking**

Complaint & Investigation Form

Please forward this information to:

City of Norfolk
Citation Processing Center
P.O. Box 1423
Alexandria, VA 22313-1423

STATE LICENSE PLATE NO: _____ STATE ISSUED IN: _____
NAME: _____ PHONE NO.: _____ DATE: _____
ADDRESS: _____ CITY & ZIP: _____
TICKET NO. _____ METER NO. _____ DATE ISSUED: _____
VIOLATION: _____ LOCATION: _____

CITIZEN'S STATEMENT (REASON CONTESTING): _____

SIGNATURE: _____ DATE: _____

MONITOR/SUPERVISOR REPORT AND CASE STATUS: _____

SIGNATURE: _____ DATE: _____

PLEASE DO NOT WRITE BELOW THIS LINE

ADMINISTRATIVE REVIEW RESULTS:

___ The citation is valid and the penalty must be paid. The amount due is \$_____. Payment must be received by _____ or the citation will be considered delinquent and subject to additional late penalties.

___ The citation will be dismissed upon proof of a valid identification, (i.e. valid handicap or monthly parker hangtag or valid city decal).

___ Your explanation is accepted and the citation is dismissed. No further action is required.

___ The citation is valid and delinquent, however the penalty will be waived. The amount due is \$_____. Payment must be received by _____ or the citation will be subject to all current and additional late penalties.

Other/Comments: _____

SIGNATURE: _____ DATE: _____

PARKING DIRECTOR SIGNATURE: _____ DATE: _____